

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

108
FILED

01 MAR 19 AM 10:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P00255**

1. Corporation Name

AMERICOLD CORPORATION

Principal Place of Business

10 GLENLAKE PKY STE 800
ATLANTA GA 30328
US

Mailing Address

10 GLENLAKE PKY STE 800
ATLANTA GA 30328
US

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

12/13/1983

5. FEI Number

93-0295215

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT

00-01

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PCEO	MCNAMARA, DANIEL F. <i>Please see list.</i>	ONE CONCOURSE PARKWAY, SUITE 450	ATLANTA GA 30328
J	FRIEDBERG, ROBERT	PARK 80 WEST, PLAZA II	SADDLE BROOK NJ 07663
VPC	SMITH, JOEL M.	ONE CONCOURSE PARKWAY, SUITE 450	ATLANTA GA 30328
V	LENEVEU, JOHN P.	7007 SW CARDINAL LN #135	PORTLAND OR
V	SENA, F. STANLEY	7007 SW CARDINAL LN #135	PORTLAND OR
S	BOOTH, BRIAN G.	888 SW 5TH #1600	PORTLAND OR

8. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

200003892072--2

-03/22/01--01019--016

***2900.00 State ***900.00 Zip Code

FL

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED JENNIFER DAULTMAN

Date **3-12-01**

REGISTERED AGENT MUST SIGN **ASSISTANT SECRETARY**

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gary Hahn

Date **1-18-01**

Daytime Phone # **678-444-1400**

CR2E040 (8/00)

20/2

**AMERICOLD CORPORATION
LIST OF
OFFICER AND DIRECTORS
MARCH 22, 2001**

<u>NAME</u>	<u>OFFICE</u>
Daniel F. McNamara	President & Chief Executive Officer
Frederick B. Beilstein, III	Executive Vice President, Treasurer & Chief Financial Officer
Joseph Macnow	Vice President
Gary Hahn	Vice President, Controller & Assistant Secretary
Latonya Bryan	Secretary & Assistant Controller
Mary Rose	Assistant Secretary & Assistant Controller
Larry Portal	Assistant Secretary
Beth Chamblee	Assistant Secretary & Assistant Controller
Michael Fascitelli	Director
Steve Roth	Director

Address -

10 Glenlake Parkway
Suite 800
Atlanta, GA 30328

Per John Mottern on 3/22/01